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BOULDER, CO 80302  
PHONE 303-938-9999  
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DATE: May 14, 2004

FROM: Brett L. Bornsen

TELEPHONE: 303-938-9999 ext. 17

NUMBER OF PAGES (including this page): 11

EMAIL: bbornsen@dsoblaw.com

TO: Mail Stop Amendment  
Commissioner for Patents

TELEPHONE:

RE: Application No. 09/317,103  
File Date: 05/21/1999  
Inventor: Tracy Lee Nelson  
Art Group: 2642  
Examiner: Hector A. Agdeppa  
Attorney Docket No. 1176

FAX: 703-872-9306

**MESSAGE**Attachments: Transmittal Form - 1 page  
Response to Office Action - 9 pages

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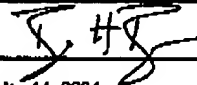
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/317,103	
	Confirmation Number	8845	
	Filing Date	05/21/1999	
	First Named Inventor	Tracy Lee Nelson	
	Art Unit	2642	
	Examiner Name	Hector A. Agdeppa	
Total Number of Pages in This Submission	10	Attorney Docket Number	1176

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):		
<table border="1"><tr><td>Remarks</td></tr><tr><td>It is believed that no fees are due in this matter. However, if it is determined that fees are due, the Commissioner is authorized to debit Deposit Account 210765 for any required fees.</td></tr></table>			Remarks	It is believed that no fees are due in this matter. However, if it is determined that fees are due, the Commissioner is authorized to debit Deposit Account 210765 for any required fees.
Remarks				
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Brett L. Bornsen, Reg. No. 46,566
Signature	
Date	May 14, 2004

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